

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee to Re-Elect Vito Fossella

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Lee Kellogg Mailing Address 14 Wall Street, 27th floor City New York State NY Zip Code 10005 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Performance Specialist Group, LLC Occupation Investor Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 4 <b>Transaction ID:</b> SA11Ai-CN9283 Amount of Each Receipt this Period 500.00 Partnership-Performance Specialist Group <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> \$500.00 MEMO Partnership Attributed
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Charles Kellogg Mailing Address 14 Wall Street, 27th floor City New York State NY Zip Code 10005 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Performance Specialist Group, LLC Occupation CEO Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 4 <b>Transaction ID:</b> SA11Ai-CN9284 Amount of Each Receipt this Period 500.00 Partnership-Performance Specialist Group <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> \$500.00 MEMO Partnership Attributed
<b>C.</b> Full Name (Last, First, Middle Initial) A L Sarroff, LLC Mailing Address 55 Liberty Street City New York State NY Zip Code 10005 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 4 <b>Transaction ID:</b> SA11Ai-CN9249 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		